

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>C</i>	<i>11/11/11</i>	<i>11/11/11</i>
O.I.P.E. CLASSIFIER	<i>11/11/11</i>	<i>11/11/11</i>	<i>11/11/11</i>
FORMALITY REVIEW	<i>11/11/11</i>	<i>11/11/11</i>	<i>11/11/11</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	8/25/11
2	✓	✓	5/31/11
3	✓	✓	5/31/11
4	✓	✓	5/31/11
5	✓	✓	5/31/11
6	✓	✓	5/31/11
7	✓	✓	5/31/11
8	✓	✓	5/31/11
9	✓	✓	5/31/11
10	✓	✓	5/31/11
11	✓	✓	5/31/11
12	✓	✓	5/31/11
13	✓	✓	5/31/11
14	✓	✓	5/31/11
15	✓	✓	5/31/11
16	✓	✓	5/31/11
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18	✓	✓	5/31/11
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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